



Master of Osteopathic Manual Practice (M. Ost.MP)

Osteopathic Practitioner Program (OP)

2013 – 2014

## WELCOME LETTER

Dear Osteopathic Practitioner Student,

Welcome to the Ontario School of Osteopathy (OSO) and the coming academic year. We look forward to an exciting and rewarding journey together as we explore the great subject that is osteopathic medicine.

There is a special synergy of passion and exploration at the Ontario School of Osteopathy. This energy exists because faculty members hold a great love for this healing art. The palpable excitement they have will be passed on to students.

The education you receive in Osteopathic Medicine will be of the highest standards. Equally important, the nurturance of you, as an **osteopathic practitioner student**, will be supported and encouraged to grow as well. Our professional faculty and employees are committed to challenging every student within an encouraging and collaborative environment.

Osteopathy is more than just a set of books; it is a way of looking at life. By being educated in Osteopathy, you will change for the better as a human being. What you carry with you from this college will profoundly help improve other people's lives.  
*That is our reason for being.*

This student handbook is designed to assist all of us in understanding college policies, procedures and what is expected of each of us within the community. I ask that you read your handbook and use it as a resource throughout the year.

In anticipation of a wonderful year, the OSO faculty and employees thank you for your faith in us. We all look forward to the year ahead with enthusiasm, excitement and confidence.

Respectfully,

Dr. Mohsen Talani & Faculty

Welcome to the Ontario School of Osteopathy Master of Osteopathic Manual Practice program. Our three year flexible modular program is designed for healthcare practitioners (HCP) to become clinically effective osteopathic manual practitioners (OP) & leaders in osteopathic healthcare.

The Master of Osteopathic Manual Practice (M.OstMP) program contains two streams: Program and Non program students.

### **Program Admission : M.Ost.MP:OP**

By the application deadline, applicants for admission to M.Ost:OP program must be graduates of a four-year Canadian (or equivalent) baccalaureate degree program in any discipline from an accredited/recognized university, with a minimum GPA of 2.5.

In addition, applicants must be a regulated health care professional or IMG with a minimum of 12 months of clinical experience. Regulated health profession include: Medical Doctor, Nurse Practitioner, Registered Nurse, Pharmacist, Massage Therapist, Homeopathic Practitioner, Naturopathic Doctor, Athletic Therapist, Physiotherapist, Chiropractor, Occupational Therapist, Speech Pathologist, Chiropodist, Social Worker, Audiologist, & Dentist.

### **Non program students**

The flexibility of our program allows all interested healthcare practitioners to attend only the modules they are interested in and can directly integrate the new knowledge into their practice. A certificate of attendance and completion is awarded. At any time, a non program student may apply to opt into the program. All previously taken and completed modules will be credited toward the program. All other admission requirements are required.

### **Osteopathic Program Schedule**

The Master of Osteopathic Manual Practice modular program is comprised of 16 modules, along with a defense of a graduate level research thesis. The osteopathic student enrolls into either the Weekend cohort or evening Weekday cohort. Concurrent streams allows for maximum flexibility and accessibility to a missed module.

## **Ontario School of Osteopathy Core Values**

The Values of OSO are:

### **Respect for the Individual**

We recognize and honor the uniqueness, diversity and learning style of each individual. We respect and value the common experiences that bring us together.

### **Commitment to Osteopathic Educational Leadership**

OSO is committed to becoming a national leader in osteopathic education. Good leadership liberates the mind from prejudice and opens the door for a lifelong journey of learning. It establishes academic excellence and provides a nurturing environment where students feel free to fully develop. Our teachers' energy and enthusiasm kindles a love of learning that is transformative for their students.

### **Community Builders**

We prepare students to be life-long contributing members of their communities. Our collaborative environment fosters constructive conflict resolution and cultural sensitivity. Students learn to relate to the natural world and develop a connection with all life.

### **Open Mindedness and Self-Awareness**

We encourage students to develop self-awareness, to remove obstacles to their learning and to care for themselves. Our goal is to guide this self-observation in a non-judgmental manner. This gentle approach and freedom from bias leads students to become true healers.

### **Dedication to Success**

We are dedicated to the success of our programs and community. At the heart of this dedication is the success of our osteopathic students.

## **OSO Academic Philosophy**

### **Excellence in Osteopathic Education and Osteopathic Student Success**

OSO is dedicated to excellence in osteopathic education, so that its students are prepared for successful careers in service to both the community and the profession. Central to the OSO philosophy is the firm belief that by example and excellence in teaching, supplemented by the opportunity for extensive practical experience, the college can develop professionals who are technically competent, compassionate, humanistic and responsive to the needs of others. Inherent in this philosophy is the College's recognition of its commitment to the student, the profession and the community.

### **Lifelong Osteopathic Student Learning Environment**

OSO strives to create a foundation for lifelong learning and diversity of learning opportunities. Students are especially encouraged to focus on the three core values of the OSO Curriculum: Humanism, Research and Community.

Through humanism, a high priority is placed on initiative, valuing autonomy and freeing everyone to do their best and most creative work. Self-awareness and self-care are supported and nurtured.

Through community, a learning environment of reciprocal care and shared responsibility is created where each person's welfare and dignity is respected and supported.

Students are encouraged to develop the ability to work as part of their communities, both locally, nationally and globally.

Through research, OSO depends on a deep and abiding understanding that inquiry, investigation, and discovery are at the heart of the College's experience. The College nurtures its students' love of inquiry and develops their ability to critically assess problems. Students are encouraged to learn to think both analytically and synthetically to find solutions to problems. This creates an environment that fosters and encourages freedom from prejudice.

### **Highly Competent Osteopathic Faculty**

OSO supports a diverse faculty. They are highly competent critical thinkers, on their own merit. Faculty are well trained, supported by the administration and model lifelong learning and self-reflections for their students.

They assist students by challenging their assumptions and holding up mirrors that allow them to see themselves. The OSO Faculty participates in faculty-driven governance for the institution.

### **Sustainable Academic Culture**

OSO places a high value on its academic community and culture by fostering the development of an osteopathic learning organization. This sustains students through their educational journey. The culture is based on facilitation, growth and mutual support. It embodies the accumulated wisdom of the community, including beliefs, assumptions and patterns and gives the College transformative powers to continuously improve itself



## OSTEOPATHIC STUDENT EVALUATION

Evaluation is ongoing and takes the form of written tests, written clinical problems, performance of selected practical techniques, oral presentations of several assignments, and the submission and oral defense of a thesis in front of a multidisciplinary peer review panel.

## SCORES

By the end of each year the student must have an overall average of 70% on the written evaluations and 70% on oral evaluations where applicable. Failure to achieve these percentages in a single year will not prevent the student's progress, as he/she will be given **one** opportunity to rewrite or perform the oral portion of these evaluations.

## WRITTEN QUIZES & EXAMINATIONS

At the onset of each module, a thirty minute *written quiz* is administered. The quizzes are designed to examine the student's comprehension of the previous course material. There are usually 10 to 15 questions on each quiz, of which are from each of the previous modules work. 8 Quizzes in Year 1; 16 Quizzes over the length of the program.

## YEAR 1 MID TERM AND FINAL EXAMINATION SCHEDULE 2013

Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Mod 1	Mod 2	Mod 3	Mod 4	Mid term Exam 1-4 Oral & Practical	Mod 5	Mod 6	Mod 7	Mod 8	Year 1 Final Exam Mod 1-8 Oral & Practical	

## ASSESSMENT STRUCTURE

The assessment structure for the Master of Osteopathic Manual Practice is based on the following course activities, with the percentage weighting of each activity as indicated. Your final grade for the first year will be a composite mark based on your performance on these program activities.

QUIZ 1- 8	15%
Individual & Group Clinical Integration Participation	15%
Mid-term Exam	30%
Year 1 Final Exam	40%
<b>Total</b>	<b>100</b>

**Students must obtain a grade of 70%.**

## Grading Policies

OSO maintains high standards of scholarship and at the same time recognizes its responsibility to provide each student the best opportunity to complete the program successfully. At the beginning of each course, the faculty is required to define clearly for the members of that class the objectives of the course and the standards and methods by which student achievement will be measured. At the end of each module, each student's performance is reported to the Registrar, using the following grading system:

H (HONORS) 90-100%  
Superior Performance:

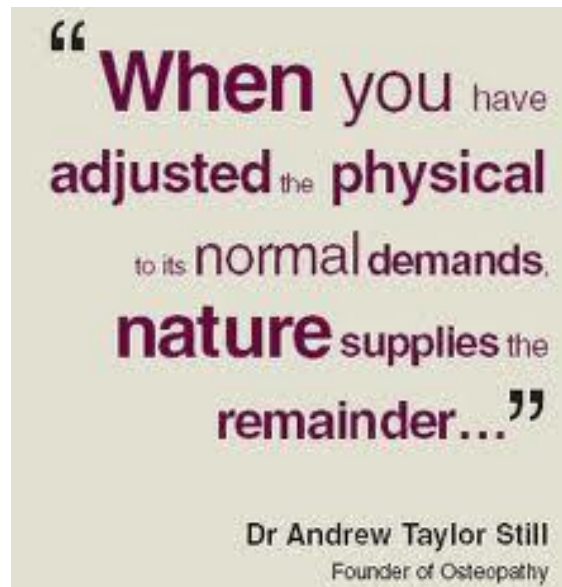
P (PASS) 80-89%  
Satisfactory performance

MP (MINIMAL PASS) 70-79%  
Marginal Performance

F (FAILURE) <69%  
Unsatisfactory Performance

I (INCOMPLETE)  
Course requirements not yet completed

W (WITHDRAWAL)  
Student withdrew from course



## **OSTEOPATHIC ORAL & PRACTICAL TESTS**

At the MIDTERM and YEAR 1 FINAL EXAM , an oral test is administered that assesses the student's ability to communicate specific somatic dysfunctions and their pathology i.e. Thoracic Outlet Syndrome. This opportunity prepares osteopathic students for the communication of the osteopathic process to their patients, the patient's relatives or to other health care practitioners. It also serves as a review of the year's work and as prelude to the final presentation of their research. Similarly, practical test is administered that assesses the student's ability to perform a set of selected osteopathic techniques.

## **GRADE APPEAL**

If a student believes that a final grade is unfair, he/she may seek an appeal for a grade change. The burden of proof is on the student. Grades are awarded and changed only by the faculty member or through the appeals process. The student must first appeal to the faculty member, presenting evidence of unfair evaluation. This must occur within the first 30 days after the grade issuance.

## **Remediation**

Any failing course grade must be remediated. A fee will be assessed for this remediation. Remediated courses are graded using the standard OSO grading system. Any "F" grade in a nonclinical course must be remediated within four weeks of the release of the course grade. Any "F" grade in a clinical course must be remediated within four weeks of the release of the course grade. The criteria and requirements for remediation are determined by the course faculty in consultation with the Department Chair. Remediation may include any or all of the following: Full re-examination, Partial re-examination, oral examination, or practice examination.

## **GRADUATION, DESIGNATION**

Following successful completion of our three-year courses, and the submission and the defense of an original piece of osteopathic research either in philosophy, or the experimental or clinical fields, the student is presented with a ***Master of Osteopathic Manual Practice (M.OstMP)*** The OSO uses the term *Manual Practice* to distinguish it from *medical practice* that is reserved for those Osteopaths who have trained in the United States as physicians.

## **Leave of Absence**

Students may apply for a leave of absence for up to six months. This entitles them to rejoin the next class at the point that they left off in their studies, provided that there is room in the class. If the student does not return by the last day allowed, they will be dropped from the program. The Program Director must be advised of a student's intention to return to OSO at least one month before the beginning of the academic term in which she/he plans to register. A leave of absence normally will be



granted to any student who is in good standing and who has satisfied all financial obligations to OSO. In the case of a medical leave of absence, which may be granted to a student, appropriate documentation is required from the attending physician. The physician must indicate the necessity of granting the leave and subsequently, the student's fitness for returning to the program. If a student on leave does not return within six months, she/he will be required to submit a new application for admission. The student will need to satisfy admission requirements in effect at the time of reapplication.

## **Year 1 (8 Modules along with all the Mandatory Clinical Practice Hours)**

### **OS141 - Osteopathic History and Philosophy**

General introduction to the history and philosophy of osteopathy.

1. Osteopathic history
2. Osteopathic philosophy
3. Osteopathic terminology
4. Embryology
5. Basic principles of biomechanics.
6. Barrier concept
7. Central, autonomic and peripheral nervous system
8. Principles of neurophysiology
9. Medical imaging
10. Ergonomics in Osteopathy
11. Professional ethics, Practitioner/Patient relationship
12. Osteopathic assessment
13. Palpation
14. General (Global) listening
15. Clinical Osteopathy (Clinical and structural diagnosis)
16. Models of osteopathic care
17. Introduction to Osteopathic treatment techniques
18. Integration of the osteopathic approach to diagnosis and treatment into current health practice.

### **OS142 - Osteopathic Principles and Biomechanics**

The theoretical basis of 'structure governs function' in osteopathic techniques and the structural mechanics.



### **OS143 - Osteopathic Examination Skills: Palpation and Assessment I**

This module will review clinical procedures for interviewing an Osteopathic patient, physical assessment according to Orthopedic Principles, neurological assessment, and bio-mechanical assessment, all within the framework of "form and function are interrelated" model of classical Osteopathy. The student will learn how to identify patterns of symptoms by palpation according to Osteopathic principles.

Palpation is especially important to osteopathic manipulative diagnosis and treatment because it is fundamental to functional and structural evaluation. Two of the essentials of effective practice are palpatory skill in locating and defining somatic dysfunctions and manipulative skill to appropriately treat them. The art of palpation requires discipline, time, patience and practice. To be most effective and productive, palpatory findings must be correlated with knowledge of functional anatomy, physiology, and pathophysiology. The development of palpation skills is fundamental to become an osteopathic practitioner and will be an essential element of the curriculum.

### Part 1 & 2

1. Review of the anatomy and physiology of the cervical region
2. Clinical biomechanics of the spine
3. Biomechanics of the cervical spine with Fryette spinal mechanics principles
4. Neurophysiology of the joints and muscles
5. Radiography of the cervical spine
6. Embryological origins of the topographical and functional anatomy of a spinal cord segment
7. Segmental innervation (Dermatomes, Myotomes, Sclerotomes)
8. Autonomic nervous system
9. Peripheral nervous system
10. Pathology of Cervical Region
  - A. Degenerative processes (osteocondrosis)
    - Compression syndromes
      - Nerve roots' compressions
      - Vascular compressions
      - Spinal cord's compressions
    - Reflectory syndromes
      - Muscular tension syndromes  
(Cervicoalgia, M. Obliquus capitis inferior syndrome, M. Scalenus Anterior syndrome, M. Levator scapulae syndrome, M. Pectoralis major syndrome, M. Pectoralis minor syndrome)
      - Vascular syndromes  
(Vertebral artery syndrome, M. scalenus medius syndrome)
      - Neurodystrophy syndromes (Humero-scapular periarthrosis (Frozen shoulder), Shoulder-hand syndrome)
  - B. Post-traumatic changes
  - C. Inflammatory processes (arthritis, osteoarthritis etc.)
  - D. Oncology
11. Osteopathic assessment of cervical region
  - General assessment
  - Intersegmental motion testing
12. Neurologic assessment of cervical region
13. Osteopathic structural diagnosis
14. Muscle Energy Techniques for the treatment of cervical region
15. Soft Tissue Techniques for the treatment of cervical region
16. Functional Technique for the treatment of cervical region

17. Counterstrain for the treatment of cervical region
18. Facilitated Positional Release for the treatment of cervical region
19. Oscillatory Techniques for the treatment of cervical region
20. Ligamentous Articular Strain Techniques for the treatment of cervical region
21. Techniques of Still for the treatment of cervical region

#### **OS144 - Applied Anatomy and Physiology**

Osteopathic models for body structure and its function. Anatomy provides a detailed study of the anatomical structures and systems of the human body, with special attention to clinically relevant surface and palpative anatomy. The musculoskeletal, vascular, lymphatic, and nervous systems are studied in depth in order to appreciate the relevance of landmarks and how physical relationships affect function.

1. Anatomy of the Central and Peripheral Nervous System
2. Physiology of the Central and Peripheral Nervous System
3. Embryology of the Central and Peripheral Nervous System
4. Pathology of the Central and Peripheral Nervous System
  - Brain
  - Spinal Cord
  - Peripheral Nerves
5. Functional pathology of the peripheral nerves
6. Assessment and treatment of the peripheral nerves
  - The cervical plexus and its branches
  - The brachial plexus and its branches
  - The lumbar plexus and its branches
  - The sacral plexus and its branches

The physiology component provides a comprehensive coverage of the structure, organization and functioning of the human body explored at progressively more complex levels. Beginning at the chemical level of organization, it progresses through the cellular, histological, organic and systemic levels to characterize the body as an interrelated and holistic entity.

#### **OS145 - Clinical Ethics and Client Safety**

Communication Skills, ethics, informed consent and safety issues. Osteopathic ethics focuses on developing students' ability to analyze many of the ethical issues that will arise throughout their professional careers. The course begins with an introduction to the professional role and responsibilities of osteopathic practitioners as a health care professional. It starts from the premise that responsibility to others invariably presupposes responsibility to self and focuses on the integral "owning" of the professional promise to serve the wellbeing and best interests of the patients and society. Osteopathic students will be introduced to philosophical traditions that ground Western moral and ethical thought. They will then learn to use a model for decision-making that will facilitate their efforts to work through ethical issues and dilemmas in the context of health care practice. This framework will guide students in working through

topics and issues such as informed consent, right to refuse treatment, patient privacy and confidentiality, cultural issues, respect for persons of difference, ageism, maintaining professional relationships and boundaries, providing equity in the delivery of health care services, treatment decision making.

### **OS146 - Osteopathic Aspect in Pathophysiology I**

Osteopathic perspective in pathophysiology: disturbances of body functions, caused by disease or prodromal symptoms. The pathology component affords a scientific study of disease. It examines the etiology and pathophysiology of disease states and the potential for progression and sequelae. Beginning with the study of general pathology, the genetic basis of disease, cellular and tissue responses to injury, inflammation, healing and repair and neoplasia, it then progresses to a systematic discussion of specific diseases of the various organs and organ systems of the body (with greatest emphasis on the most common and clinically relevant disease processes). The pathophysiology of local and systemic changes occurring in the body during illness is discussed to better understand the rationale for methods of diagnosis and treatment in clinical practice.

### **OS147 – Osteopathic Principles, Practice, Techniques and Procedures I**

Muscle Energy Technique (MET) ,  
Myofascial Release  
Oscillatory Osteoarticular Release  
Still technique  
Chapman Reflexes  
Traction Treatment  
Introduction to Integrated Osteopathic Treatment



Classification of osteopathic treatment techniques

1. Muscle Energy Technique
  - Principles of neurophysiology
  - Muscle spindle reflex
  - Golgi tendon reflex
  - Reciprocal Inhibition
  - Crossed extensor reflex
  - Principles of Muscle Energy Technique
  - Respiratory Assistance
  - Oculocephalogyric Reflex
  - MET for individual muscles
  
2. Fascia and Myofascial Release
  - Cellular physiology
  - Classification of connective tissues
  - Structure of connective tissues
  - Types and functions of fascial systems

- Fascial patterns according to Zink
  - Myofascial Release Technique
  - Regional and local stretch
  - Longitudinal, transverse and combined stretch
  - Diaphragm release
3. Techniques of Still
  4. Chapman reflexes
    - Distinguishing characteristics
    - Clinical applications
  5. Counterstrain
    - Physiologic basis
    - General rules
    - Basic Steps
    - Location and treatment of common anterior and posterior cervical tender points
    - Location and treatment of common anterior and posterior thoracic tender points
    - Location and treatment of common anterior and posterior lumbar tender points
  6. Facilitated Positional Release
    - Physiologic basis
    - General rules
    - Basic Steps
    - Tissue Texture Change Treatment
    - Intervertebral Motion Restriction Treatment in cervical, thoracic and lumbar spine
  7. Oscillatory Techniques
    - Harmonic technique
    - Facilitated Oscillatory Release
    - Harmonic versus rhythmic techniques
    - Pendular and spring mechanisms
    - Harmonic technique as manual therapy
    - General rules
    - Oscillatory Techniques for different body masses
  8. Ligamentous Articular Strain (LAS) and Balanced Ligamentous Tension (BLT)
    - Physiologic basis
    - General rules
    - Basic Steps
    - Ligamentous Articular Strain treatment for individual regions of the body

## **OS148 - Osteopathic Principles, Practice, Techniques & Procedures II**

Active and passive treatment approaches General and specific treatment approaches

Clinical problem solving and reasoning Evidence based practice

1. Review of the anatomy and physiology of the lumbar region
2. Biomechanics of the lumbar spine and ribs with Fryette spinal mechanics principles
3. Radiography of the lumbar spine
4. Embryological origins of the topographical and functional anatomy of a spinal cord segment
5. Segmental innervation (Dermatomes, Myotomes, Sclerotomes)
6. Autonomic nervous system
7. Peripheral nervous system
8. Pathology of lumbar region
  - A. Degenerative processes (osteocondrosis)
    - Compression syndromes
      - Herniated Nucleus Pulposus
      - Nerve roots' compressions
      - Spinal Stenosis
      - Spondylolisthesis and spondylolysis
    - Reflectory syndromes
      - Lumbalgia (M. quadrates lumborum, M. psoas, M. multifidi and rotatores)
  - B. Post-traumatic changes
  - C. Inflammatory processes (osteoarthritis etc.)
  - D. Oncology
9. Osteopathic assessment of lumbar region
  - General assessment
  - Intersegmental motion testing
10. Osteopathic structural diagnosis
11. Muscle Energy Techniques for the treatment of lumbar region
12. Soft Tissue Techniques for the treatment of lumbar region
13. Functional Technique for the treatment of lumbar region
14. Counterstrain for the treatment of lumbar region
15. Facilitated Positional Release for the treatment of lumbar region
16. Oscillatory Techniques for the treatment of lumbar region
17. Ligamentous Articular Strain Techniques for the treatment of lumbar region
18. Techniques of Still for the treatment of lumbar region

## **OS149 - Clinical Practice I**

The clinical integration portion of the program is a crucial component of the OSO Masters of Osteopathic Manipulative Practice. Clinical Integration connects the osteopathic philosophy, osteopathic methodology into osteopathic practice. Clinical applications are introduced in each module but the majority of instruction and application is concentrated during the clinical integration day.

In order to fully consolidate the course material, *clinical workshop* has been added to the program during the 3rd year. Under the supervision of the experienced faculty of the OSO, these clinical days allow the student to immediately integrate their days of philosophy, theory, methodology, and technique into clinical practice.

## **Year 2 (8 Modules along with all the Mandatory Clinical Practice Hours)**

### **OS214 – Pediatric Osteopathic Principles and Biomechanics**



Paediatrics presents a general overview of paediatric conditions seen in osteopathic practice and the differential diagnosis and assessment of the common problems of infancy, childhood and adolescence. This includes health maintenance, disease prevention, the early diagnosis and osteopathic treatment of common childhood conditions and diseases, and referral where appropriate. Emphasis is on the development of a healthy lifestyle at an early age.

1. The pediatric osteopathic practice
2. Normal development and pathology of prenatal period
3. Normal and pathological birth process and its effect on child
4. Normal development and pathology of postnatal period
5. Osteopathic assessment of the infant and toddler
6. Osteopathic assessment of the preschooler and schoolchild
7. Psychological aspects in Pediatrics
8. Pediatric systemic dysfunctions
  - Musculoskeletal system
  - Respiratory system
  - Gastrointestinal system
  - Nervous system
9. Orthodontics
10. An osteopathic treatment approach in pediatrics.



## **OS215 - Osteopathic Examination Skills: Palpation and Assessment II**

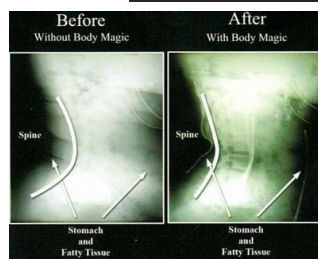
Patient observation, osteopathic diagnosis, palpation and mobility testing. Palpation is especially important to osteopathic manipulative diagnosis and treatment because it is fundamental to functional and structural evaluation. Two of the essentials of effective practice are palpatory skill in locating and defining somatic dysfunctions and manipulative skill to appropriately treat them. The art of palpation requires discipline, time, patience and practice. To be most effective and productive, palpatory findings must be correlated with knowledge of functional anatomy, physiology, and pathophysiology. The development of palpation skills is fundamental to become an osteopathic practitioner and will be an essential element of the curriculum.



## **OS216 - Osteopathic Aspect in Pathophysiology II**

Osteopathic perspective in pathophysiology: disturbances of body functions, caused by disease or prodromal symptoms.

## **OS217 - Diagnostic Medical imaging & Lab Tests for the Osteopathic Practitioner**



The importance of MRI, X-Ray, CT Scans and Ultrasound in the diagnosis of musculo-skeletal disease. The laboratory diagnosis component enables osteopathic students to critically evaluate and apply the results of commonly used laboratory tests. Tests covered by this section of the course include serological chemistry and haematology, urinalysis, endocrine panels and other analyses used for the purpose of ascertaining body function and disease diagnosis. Related

laboratory parameters and disease states (pathologies) are coordinated throughout the program in order to best integrate the information and to facilitate the learning process.

## **OS218 - Nutrition and the effects on the Musculoskeletal system for the Osteopathic Practitioner**

Principles of nutrition and assessment methods of nutritional status of patients. Osteopathic practitioners use adjunctive healing approaches in their practice, most are unaware of new discoveries in the field of nutrition, which not only eliminate obstacles but actually dramatically improve the action of osteopathic therapy. Poor nutrition is one of the major obstacles to good health, and the intelligent and judicious use of nutritional supplements, foods and detoxification methods can assist all practitioners in helping their patients realize the greatest health and vitality. The practical approach employed in this class will help you acquire the knowledge to immediately improve the quality of care offered to your patients, friends and family members

### **OS219 - Basic Homeopathic First Aid/ Biopuncture Therapy & Herbal Pharmacy for the Osteopathic Practitioner**

A basic understanding of the physiological/biochemical action of pharmacological agents, their side-effects and interactions. Overview of homeopathic medicine and commonly prescribed topical and oral medicine. Homeopathic Biopuncture will be is a safe and efficient injection technique utilizing homeopathic medicines to stimulate the natural self-healing abilities of the body. Biopuncture therapy has great potential for those suffering from joint pain, neck pain, back pain, arthritis, sciatica, muscle strains and sprains.

### **OS220 – Cranial Sacral Osteopathic Principles and Treatment Practice**

Active and passive approach General and specific approach Clinical problem solving and reasoning Evidence based practice

1. Primary Respiratory Mechanism
2. Theories & Research of Craniosacral Motion's Mechanism
3. Review of Cranial Anatomy
4. Osteopathic Cranial Assessment
  - General Cranial Counturs
  - Soft Tissue Assessment including:
    - a) Temporomandibular area
    - b) Suboccipital triangle
    - c) Floor of the mouth and submandibular region
  - Sutural Assessment
    - a) skull resilience
    - b) suture compression
    - c) suture stretching
5. Craniosacral motion assessment
6. Cranial Base Dysfunction
  - Flexion
  - Extension
  - Torsion
  - Sidebending Rotation
  - Lateral & Vertical Strain
  - Compression
7. Craniosacral system (including individual bones) motion patterns
8. Review and examination of cranial nerves (CNI-XII)

9. Examination of vestibular and coordination functions of CNS:
  - Romberg's test
  - Hautant's test
  - Oculostatic reflex
  - Coordination Exam
10. Treatment techniques
  - Muscle Energy Techniques for cranial muscles
  - Sutural V-Spread
  - Disengagement techniques
  - CV-4

## Part 2

1. Review of major medical conditions in the cranial area with differential diagnosis of:
  - Headache
  - Postconcussional Disorder (PCD)
  - Vertigo
  - TMJ Disorder
2. Cranial approach in Pediatric Osteopathy
3. Cranial Base Dysfunctions' Releases
4. Mobilization of cranial bones including:
  - Temporalis, Maxilla, Frontal, Parietals, Occiput
5. Mobilization of TMJ, orbits, sinuses
6. Osteopathic treatment of cranial nerves (CNI-XII)
7. Cranial Osteopathy Clinical Applications

## **OS221 – Obstetrics & Osteopathic Techniques and Procedures**

1. Review of the anatomy and physiology of the pelvic region
2. Pelvic types and Biomechanics of the pelvis
3. Gate Pelvic Motion
4. The Pelvis During Pregnancy
5. Radiography of the pelvis
6. Embryological origins of the topographical and functional pelvic anatomy
7. Autonomic nervous system
8. Peripheral nervous system
9. Pathology of pelvic region
  - A. Inflammatory processes (osteoarthritis, gynecologic, urologic etc.)
  - B. Pathology of pelvic ligaments
  - C. Pelvic Floor Dysfunction and a tender coccyx
  - D. Short Leg Syndrome
  - E. Post-traumatic changes
  - F. Oncology

10. Somatic dysfunction at the sacroiliac joint
  - A. Iliosacral Somatic Dysfunction
    1. Anterior ilial rotation
    2. Posterior ilial rotation
    3. Superior innominate shear
    4. Inferior innominate shear
  - B. Sacroiliac Somatic Dysfunctions
    1. Forward sacral torsions
      - a. Left on left sacral torsion
      - b. Right on right sacral torsion
    2. Backward sacral torsions
      - a. Left on right sacral torsion
      - b. Right on left sacral torsion
    3. Unilateral sacral flexions
      - a. Left unilateral sacral flexion
      - b. Right unilateral sacral flexion
    4. Bilateral sacral flexion dysfunction
    5. Bilateral sacral extension dysfunction
11. Osteopathic assessment of pelvic region: Examination and Motion Testing
12. Osteopathic structural diagnosis
13. Muscle Energy Techniques for the treatment of pelvic region
14. Soft Tissue Techniques for the treatment of pelvic region
15. Osteoarticular Techniques for the treatment of pelvic region
16. Counterstrain for the treatment of pelvic region
17. Oscillatory Techniques for the treatment of pelvic region
18. Ligamentous Articular Strain Techniques for the treatment of pelvic region
19. Techniques of Still for the treatment of pelvic region

### **OS222 - Clinical Practice II**

The clinical integration portion of the program is a crucial component of the OSO Masters of Osteopathic Manipulative Practice. Clinical Integration connects the osteopathic philosophy, osteopathic methodology into osteopathic practice. Clinical applications are introduced in each module but the majority of instruction and application is concentrated during the clinical integration day. In order to fully consolidate the course material, *clinical workshop* has been added to the program during the 3rd year. Under the supervision of the experienced faculty of the OSO, these clinical days allow the student to immediately integrate their days of philosophy, theory, methodology, and technique into clinical practice.

## Year 3

### **OS321 - Practicum with Osteopaths**

Students applying their evaluation and treatment knowledge at approved location of practicum under the supervision of an Osteopath.

### **OS323 - Osteopathic Research / Thesis project & Defense (12 months)**

By the midterm of year 2, the osteopathic student shall declare their osteopathic research project/thesis. Osteopathic research involves a literature review or a piece of investigative research. Following the completion of the two academic years, the students begin their research. This year of research is the foundation upon which students are able to integrate the material they have studied in the previous two years and to consolidate their knowledge through practical application. Moreover this period is an opportunity for students to help advance the field of Osteopathy through their research. Editorial Format/Style: OSO has adopted the Publication Manual of The American Psychological Association, Sixth Edition, and American Psychological Association for written papers, projects and other required course documents.